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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	PA27-02V12
	First Named Inventor	Willson et al.
	COMPLETE IF KNOWN	
	Application Number	09/905,718
	Filing Date	May 16, 2001
	Group Art Unit	Unassigned
<input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	Unassigned

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR FABRICATING NANOSCALE PATTERNS IN LIGHT CURABLE COMPOSITIONS USING AN ELECTRIC FIELD

(Title of the Invention)

the specification of which

☐

is attached hereto

OR

☒

was filed on

05/16/2002

as United States Application Number or PCT International

Application Number 09/905,718 and was amended on (MM/DD/YYYY) May 16, 2002 (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

(Page 1 of 3)

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.

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DECLARATION – Utility or Design Patent Application

Direct all correspondence to:

☐ Customer Number
or Bar Code Label

OR ☒

Correspondence address below

Name Molecular Imprints, Inc., Legal Department

Address P.O. Box 81536

City Austin

State Texas

ZIP 78708-1536

Country United States

Telephone 512 527-0104

Fax 512 527-0107

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Carlton Grant

Family Name
or Surname Willson

Inventor's
Signature

Date 4/17/02

Residence: Austin

State Texas

Country United States

Citizenship United States

Mailing Address 4 Downie Place

City Austin

State Texas

ZIP 78746

Country United States

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) Sidgata V.

Family Name
or Surname Sreenivasan

Inventor's
Signature

Date 12/02/02

Residence: City Austin

State Texas

Country United States

Citizenship United States

Mailing Address 10502 Grand Oak Drive

City Austin

State Texas

ZIP 78750

Country United States

☒

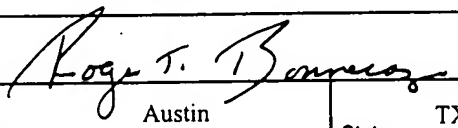
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

Please type a plus sign (+) inside this box → ☐

PTO/SB/02A (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>3</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Roger T.		Bonnecaze	
Inventor's Signature 		Date <u>11/19/02</u>	
Residence: City Austin	State TX	Country USA	Citizenship USA
Mailing Address 2110 West 10th Street			
Mailing Address			
City Austin	State TX	ZIP 78703	Country USA
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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PTO/SB/82 (11-96)
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Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

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REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/905,718
Filing Date	May 16, 2002
First Named Inventor	Willson et al.
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	PA27-02V12

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☐ Please change the correspondence address for the above-identified application to:

☐ Customer Number

OR

Place Customer
Number Bar Code
Label here

<input type="checkbox"/> Firm or Individual Name				
Address				
Address				
City				
Country		State		ZIP
Telephone		Fax		

I am the:

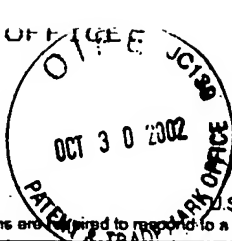
☒ Applicant.

☐ Assignee of record of the entire interest
Certificate under 37 CFR 3.73(b) is enclosed

SIGNATURE of Applicant or Assignee of Record

Name	Sidlgata V. Sreenivasan
Signature	
Date	Oct 29, 2002

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box → ☐

PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0851-0035

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	09/805,718
Filing Date	May 16, 2002
First Named Inventor	Wilson et al.
Title	Method and System for Fabricating Nanoscale Patterns in Light Curable Compositions Using an Electric Field
Group Art Unit	Unassigned
Examiner Name	Unassigned
Attorney Docket Number	PA27-02V12

I hereby appoint:

☐ Practitioners at Customer Number

OR

☒ Practitioner(s) named below:
Place Customer
Number Bar Code
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Name	Registration Number
Kenneth C. Brooks	38,393

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.

OR

☐ Practitioners at Customer Number

OR

Place Customer
Number Bar Code
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<input checked="" type="checkbox"/> Firm or Individual Name	Molecular Imprints, Inc.				
Address	Legal Department				
Address	P.O. Box 81536				
City	Austin	State	Texas	Zip	78708-1536
Country	USA				
Telephone	(512) 527-0104	Fax	(512) 527-0107		

I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
SIGNATURE of Applicant or Assignee of Record

Name	Sidigata V. Sreenivasan
Signature	
Date	OCT. 24, 2002

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.